Revision: HCFA-PM-86-20 (BERC)

SEPTEMBER 1984

ATTACHMENT 3.1-A Page 7 OMB NO.: 0938-0193

AMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY

15.8.	Intermediate care facility services (other than such services in an institution for mental diseases) for persons determined, in accordance with section 1902(a)(31)(A) of the Act, to be in need of such care.							
	<u>/ x /</u>	Provided:	二	No limitati	ons /X	With limit	ations*	
		Not provid	led.					
ъ.					ic instititut d or persons			
	/ <u>X/</u>	Provided:	<u>~</u>	No limitati	ons /X/	With limit	ations*	
	二	Not provid	led.					
16.	Inpat of ag		atric	facility se	ervices for in	dividuals ur	nder 22 years	
	<u>/x/</u>	Provided:		Wo limitati	ons /x/	With limit	tations*	
	<u>~</u>	Not provid	led.					
17.	Nurse	-midwife se	rvice	₽.				
	<u>/ X/</u>	Provided:		Wo limitati	ons \sqrt{X}	With limit	ations*	
		Not provid	ed.					
18.	Hospi	ce care (in	a cco.	rdance with	section 1905(o) of the Ac	:t).	
	<u>/x/</u>	Provided:		No limitati	ons <u>/X</u> /	With limi	tations*	
	<u></u>	B Qt provide	d.	•				

*Description provided on attachment.
Including prior authorization requirements as specified in pages 9, 10 and 11

TH No. 88-12

of this attachment

Supersedes

Approval Date DEC 2 2 1988

Effective Date 7/1/88

TH No. 87-07

HCFA ID: 0069P/0002P

Attachment 3.1-A Supplement to Page 7

LIMITATIONS

OFFICIAL

17. Nurse-Midwife Services

As provided for in the Rules and Regulations of the State of Rhode Island for the licensing of midwives.

18. Hospice Care Services

Limited to a lifetime maximum of 210 days.

DEC 2 2 1988

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

	St	ate/Territory: RHODE ISLAND
	AND	AMOUNT, DURATION, AND SCOPE OF MEDICAL REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY
). Case	mana	agement services and Tuberculosis related services
	a.	Case management services as defined in, and to the group specified in, Supplement 1 to ATTACHMENT 3.1-A (in accordance with section 1905(a)(19) or section 1915(g) of the Act).
	<u>x</u>	Provided: X With limitations
		Not provided.
	b.	Special tuberculosis (TB) related services under section $1902(z)(2)(F)$ of the Act.
	<u>x</u>	Provided: X With limitations*
		Not provided.
). Exte	ended	services for pregnant women +++
	a.	Pregnancy-related and postpartum services for a 60-day period after the pregnancy ends and any remaining days in the month in which the 60th day falls.
•		Additional coverage ++
	b.	Services for any other medical conditions that may complicate pregnancy.
		Additional coverage ++
.*	++	Attached is a description of increases in covered services beyond limitations for all groups described in this attachment and/or any additional services provided to pregnant women only.
	+++	All services within the scope of attachment 3.1-A are provided, except NF, ICF-MR facility services, subject to the limitations described in Attachment 3.1-A, including the prior authorization requirements as specified in page 9, 10, and 11.
		provided on attachment, and including prior authorization requiremen
speci	fied	in pages 9, 10, and 11 of this attachment.
		다 보고
		်

19. Case Management Services

DEFINITION OF CASE MANAGEMENT:

Case Management refers to services provided by <u>professional mental</u> health staff for the purpose of monitoring and assisting clients in their over-all life situations including gaining access to needed medical, social, educational and other services necessary to meeting basic human needs. These services may include, but are not necessarily limited to:

- maintaining up-to-date assessments and evaluations necessary for establishing eligibility for services;
- participating in the treatment planning process and monitoring client progress in meeting the goals and objectives of the plan;
- locating, coordinating and monitoring all necessary medical, educational, vocational, social and psychiatric services;
- assisting in development and execution of a plan for assuring income maintenance;
- assisting in development of appropriate social networks;
- assistance with other activities necessary to maintain psychiatric stability in a community-based setting.

TARGET GROUP 1

The "target" group for this amendment shall be severely mentally disabled persons who:

- are receiving community based services from providers of mental health services in the State of Rhode Island which are licensed by the Department of MHRH, provide services under contract to the Department of Mental Health and in accordance with the Rules, Regulations and Standards for Licensing of Mental Health Facilities and Programs and;
- are eligible for Title XIX Medical Assistance Coverage either as categorically eligible or as medically needy only;
- with a severe and/or persistent mental or emotional disorder that seriously impairs their functioning relative to such primary aspects of daily living as personal relations, living arrangements or employment and;
- suffer a severe disability resulting from mental illness as evidenced by a) having undergone psychiatric treatment more

- p. 8.1 -

TN No. 91-23 Approval Cate 10 1 1992 Effective Date 10 1 1 Supersedes
TN No. 87-04

LIMITATIONS

Attachment 3.1-A Supplement to Page 8

19. Case Management Services (continued)

- 2. The state assures that the provision of optional case management under this section will be distinguished from any case management services provided as part of its approved Section 2176 Home and Community-Based Waiver authorized under Section 1915(c) of the Social Security Act.
- 3. The state assures that clients will have freedom of choice of providers.

TARGET GROUP 2

[Reserved]

-p. 8.3 -

LIMITATIONS

Attachment 3.1-A Supplement to Page 8

Case Management Services (continued) 19.

[Reserved]

Qualified Staff

[Reserved]

Assurances

[Reserved]

TARGET GROUP 3

The "target" group for this amendment shall be children between the ages of one day and five years of age who:

-p. 8.4 -

13d. Case Management Services (continued)

-are under the care or custody of the Department of Children, Youth and Their Families and;

-have tested positive for HIV infection or have been determined to be at risk of HIV infection through having a parent testing positive for HIV infection, and;

-are receiving medical services from providers in the State of Rhode Island which are licensed by the Department of Children, Youth and Their Families, provide service under contract to the Department of Children, Youth and Their Families categorized as a "FACTS" provider and provides care in accordance with the Rules, Regulations, and Standards for child care and;

-are eligible for Title XIX Medical Assistance Coverage either as categorically eligible or medically needy only and are eligible for early and periodic screening, diagnosis and treatment (EPSDT) program.

Qualified Staff

The overall case management program at each provider agency must be directed by a registered nurse or equivalent health professional with at least two years experience in the delivery of case management services and be supervised by a licensed physician. All services shall be delivered in accordance with the requirements specified by contract with the Department of Children, Youth and Their Families.

Assurances

The state assures that payments made for targeted case management services will not duplicate payments made to public agencies or private entities under other program authorities for this same purpose. The state further assures that payment under this provision will not be made for case management services which are an integral part of another provider service.

The state assures that the provision of optional case management under this section will be distinguished from any case management services provided as part of its approved Section 2178 home and Community-Based Waiver authorized under Section 195(c) of the Social Security Act.

- p. 8.5 -

13d. Case Management Services (continued)

TOTAL

TARGET GROUP 4

The "target" group for this amendment shall be children between the ages of one day and three years of age who:

- meet the criteria for <u>Developmental Delay and Established</u>
 <u>Conditions</u> (Early Intervention services under part H) as
 outlined in applicable state regulations; and
- are receiving medical services from providers in the State of Rhode Island which are licensed by the Department of Health to provide Early Intervention services in accordance with established state regulations; and
- are eligible for Title XIX Medical Assistance Coverage either as categorically eligible or medically needy only and are eligible for early and periodic screening, diagnosis and treatment (EPSDT) program.

Qualified Staff

The overall case management program at each provider agency must be directed by a qualified mental health professional as defined in the Rhode Island general laws or by a person possessing equivalent experience in working with the mentally ill or emotionally disturbed in community settings. Each staff member providing case management services, must be a mental health professional with at least an Associate's Degree in the social sciences or equivalent experience or a combination thereof and must receive specialized training including a complete orientation to the community services/agencies in Rhode Island as well as meeting all other requirements specified by contract with the Department of Health.

Assurances

The state assures that payments made for targeted case management services will not duplicate payments made to public agencies or private entities under other program authorities for this same purpose. The state further assures that payment under this provision will not be made for case management services which are an integral part of another provider service.

The state assures that the provision of optional case management under this section will be distinguished from any case management services provided as part of its approved Section 2178 home and Community-Based Waiver authorized under Section 1915(c) of the Social Security Act.

- p. 8.6 -

13d. Case Management Services (continued)

RGET GROUP 5

Target Group Five consists of pregnant or parenting adolescents (defined as individuals who have not attained age twenty) or the children of pregnant or parenting adolescents who:

- meet the criteria for services provided under the Adolescent Parenting Program of the Department of Human Services, and
- are receiving case management services from providers in the State of Rhode Island which are certified and under contract with the Department of Human Services to provide adolescent parenting services pursuant to established state regulations, and
- are eligible for and receiving Title XIX Medical Assistance coverage as categorically needy, and
- are eligible for the early and periodic screening, diagnosis and treatment (EPSDT) program, and
- are not receiving adolescent parenting services funded by other sources including the JOBS program, and
- are pregnant or parenting and at risk.

Qualified Staff

The overall case management program at each provider agency must be directed by the qualified professional of the Adolescent Parenting Project or by a person possessing equivalent experience in working with adolescent parents. Each staff member providing case management services must possess at least an Associate's Degree in the social sciences or equivalent experience or a combination thereof and must receive specialized training including a complete orientation to the community services/agencies in Rhode Island as well as meeting all other requirements specified by the Department of Human Services Adolescent Parenting Project.

Assurances

The state assures that payments made for targeted case management services will not duplicate payments made to public agencies or private entities under other program authorities for this same purpose. The state further assures that payment under this provision will not be made for case management services which are an integral part of another provider service.

- p. 8.7
TN No. 92-23 Approval Date NOV 1 9 1992 Effective Date 07/01/92
Supersedes
TN No. NEW

Attachment 3.1-A Supplement to Page 8

13d. Case Management Services (continued)

The state assures that the provision of optional case management under this section will be distinguished from any case management services provided as part of its approved Section 2178 home and Community-Based Waiver authorized under Section 1915(c) of the Social Security Act.

The state assures that participants will have the freedom of choice of providers.

TARGET GROUP 6

Target group six shall be children between the ages of three years of age and twenty one years of age who:

- meet the criteria for Special Education services (Part B services) as outlined in applicable state regulations; and
- are receiving medical services from local education agencies in the State of Rhode Island which are licensed by the Department of Education to provide Special Education services in accordance with established state regulations; and
- are eligible for Title XIX Medical Assistance coverage as categorically needy; and
- are eligible for the early and periodic screening, diagnosis and treatment (EPSDT) program.

Qualified Staff

The overall case management program at each provider agency must be directed by a qualified mental health professional as defined in the Rhode Island General laws or by a person possessing equivalent experience in working with special education students. Each staff member providing case management services, must be a mental health professional with at least an Associate's Degree in the social sciences or equivalent experience or a combination thereof and must receive specialized training including a complete orientation to the community services/agencies in Rhode island as well as meeting all other requirements specified by the Department of Education.

Assurances

The state assures that payments made for targeted case management services will not duplicate payments made to public agencies or private entities under other program authorities for this same purpose. The state further assures that payment under this provision will not be made

TN No. 92-23 Approval Date NOV - 1 Effective Date 07/01/92 Supersedes
TN No. NEW